

APPLICATION FOR EMPLOYMENT

CITY OF SACO, MAINE

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the City Administration Personnel Office.

Position(s) applied for _____ Date of application _____ / _____ / _____

Reference Source _____ Advertisement _____ Employee _____ Walk-in
_____ Government Employment Agency _____ Relative _____ Other

Name of source (if applicable) _____

Name _____			
_____ Last	_____ First	_____ Middle	
Address _____			
_____ Street	_____ Town/City of Saco	_____ State	_____ Zip Code
Telephone # _____		Mobile/Beeper/Other Phone # _____	
Email Address _____ Social Security # _____			

If necessary, best time to call you at home is.....

May we contact you at work? ☐ Yes ☐ No

If yes, work number and best time to call.....(_____) _____
Telephone # Best Time to Call

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No

If no, please explain _____

Have you submitted an application here before? ☐ Yes ☐ No

If yes, give date(s) and position(s) _____

Have you ever been employed here before? ☐ Yes ☐ No

If yes, give dates.....From _____ / _____ / _____ To _____ / _____ / _____

Are you legally eligible for employment in this country? ☐ Yes ☐ No

Date available for work _____ / _____ / _____ What is your desired salary range? \$ _____

Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Seasonal ☐ Temporary

Are you able to meet the attendance requirements of the position ☐ Yes ☐ No

Will you work overtime if required? ☐ Yes ☐ No

If no, please explain _____

Have you ever been bonded? ☐ Yes ☐ No

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime ☐ Yes ☐ No

If yes, please provide date(s) and details _____

Answering "yes" to these questions does not constitute automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's License number if driving is an essential job function # _____ State _____

EMPLOYMENT HISTORY

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

Employer_____Telephone_____

Address_____

Job Title_____

Immediate Supervisor_____

Reason for Leaving_____

Start Date_____End Date_____

May we contact for reference?_____

Employer_____Telephone_____

Address_____

Job Title_____

Immediate Supervisor_____

Reason for Leaving_____

Start Date_____End Date_____

May we contact for reference?_____

Employer_____Telephone_____

Address_____

Job Title_____

Immediate Supervisor_____

Reason for Leaving_____

Start Date_____End Date_____

May we contact for reference?_____

Comments including explanation of any gaps in employment _____

SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

EDUCATION

List last three (3) schools attended, starting with most current. List number of years completed. Indicate degree or diploma earned, if any.

1. School	# yrs completed	Degree/Diploma
2. School	# yrs completed	Degree/Diploma
3. School	# yrs completed	Degree/Diploma

REFERENCES

List name and telephone of three business/work references who are *not* related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

1. Name	Telephone Number	# of years Known
2. Name	Telephone Number	# of years Known
3. Name	Telephone Number	# of years Known

ADDITIONAL INFORMATION

List any additional information you would like us to consider.

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the City of Saco is true, complete and correct to the best of my knowledge.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the City of Saco's employment whenever it is discovered.

I expressly authorize, with reservation, the City of Saco, its representatives, employees or agents, to contact and obtain information from all references (personal or professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the City of Saco, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporation for furnishing such information about me.

I understand that the City of Saco does not unlawfully discriminate in employment and not question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the City of Saco reserves the same right to terminate my employment at any time, with or without prior notice, except as may be required by federal and state law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the City of Saco is authorized to make any assurances to the contrary and that no applied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City Administrator.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ **Date** _____ / _____ / _____

Upon completion, mail this application to:
Human Resources, City of Saco, 300 Main St., Saco, Maine 04072

